

**SECRET**

Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110106-8

| REPORTS INVENTORY   |             |   |                  |   |                 | CONTROL NO.  |                                |                                 |
|---|-------------|---|------------------|---|-----------------|--|--------------------------------|---------------------------------|
| PREPARE IN DUPLICATE  |             |   |                  |   |                 | DDS/OF-171   |                                |                                 |
| 1. TITLE OF REPORT (if a fill-in report include Form No.)<br>Account No. 1422, Advances to Projects (not subsidy)   |             |   |                  |   |                 | 2. TYPE OF REPORT  |                                |                                 |
| 3. FUNCTIONAL AREA  |             |   |                  |   |                 | <input checked="" type="checkbox"/> STATISTICAL<br><input type="checkbox"/> NARRATIVE<br><input type="checkbox"/> MACHINE-NAME LISTING |                                |                                 |
|   |             |   |                  |   |                 | PERSONNEL<br>LOGISTICS<br>MEDICAL  |                                | TRAINING<br>SECURITY<br>FINANCE |
|   |             |   |                  |   |                 | ADMIN. GENERAL<br>OTHER (specify)  |                                |                                 |
| 4. NO. OF COPIES PREPARED   |             | 5. FREQUENCY (weekly, monthly, quarterly, etc.)<br><div style="text-align: center;">Monthly</div>                           |                  |   |                 | 6. DISTRIBUTION (No. of components not number of copies)<br><div style="text-align: center;">14</div>                                  |                                |                                 |
| 7. FORMAT (memorandum, form computer print-out, etc.)<br>Machine Listing  |             | 8. ADP PROCESSING   |                  |   |                 | 9. DIRECTIVE AUTHORITY REQUIRING REPORT  |                                |                                 |
|   |             | <input checked="" type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO.<br><input type="checkbox"/> NO Job: 212, Prog: A-5-N |                  |   |                 |  |                                |                                 |
| 10. PREPARING COMPONENT (Include lowest level contributing information to report)<br><div style="text-align: center;">Accounts</div>  |             |   |                  | 11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) |                 |  |                                |                                 |
| 12. COST FACTORS  |             |   |                  |   |                 |  |                                |                                 |
| A. MANUAL PREPARATION AND REVIEW COSTS  |             |   |                  |   |                 |  |                                |                                 |
| GRADE   | HOURLY RATE | <input checked="" type="checkbox"/>   | HOURS PER REPORT | =   | COST PER REPORT | <input checked="" type="checkbox"/>  | TIMES PREPARED = COST PER YEAR |                                 |
| Pro rata share of review, analysis and distribution time.   |             |   |                  |   |                 |  | \$104.84                       |                                 |
| B. COSTS OF COMPUTER PRODUCED REPORTS   |             |   |                  |   |                 |  |                                |                                 |
| 41 pages x 4 cys = 164 pages x 3¢ = \$4.92 x 12 times =   |             |   |                  |   |                 |  | \$59.04                        |                                 |
| TOTAL COSTS PER YEAR  |             |   |                  |   |                 | <del>\$159.04</del> \$ 163.88  |                                |                                 |
| 13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. |             |   |                  |   |                 |  |                                |                                 |
| 14. FUTURE GOALS  |             |   |                  |   |                 |  |                                |                                 |
| GOAL PROPOSED BY COMPONENT FOR THIS REPORT<br><input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain)<br><input type="checkbox"/> CHANGE<br><input type="checkbox"/> DISCONTINUE |             |   |                  |   |                 | ESTIMATED SAVINGS  |                                |                                 |
|   |             |   |                  |   |                 | MAN-HOURS  | DOLLARS                        |                                 |
| 16. DATE OF INVENTORY   |             | 17. NAME AND TITLE OF PERSON FURNISHING INFORMATION   |                  |   |                 |  | 18. EXTENSION                  |                                 |
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